



Enter your transmittal number

Start 2/25

W210520

Transmittal Number

Your unique Transmittal Number can be accessed online: <http://mass.gov/dep/service/online/trasmfrm.shtml> or call MassDEP's InfoLine at 617-338-2255 or 800-462-0444 (from 508, 781, and 978 area codes).

Massachusetts Department of Environmental Protection

Transmittal Form for Permit Application and Payment

291980

2/15/08

1. Please type or print. A separate Transmittal Form must be completed for each permit application.

2. Make your check payable to the Commonwealth of Massachusetts and mail it with a copy of this form to: DEP, P.O. Box 4062, Boston, MA 02211.

3. Three copies of this form will be needed.

Copy 1 - the original must accompany your permit application. Copy 2 must accompany your fee payment. Copy 3 should be retained for your records

4. Both fee-paying and exempt applicants must mail a copy of this transmittal form to:

MassDEP
P.O. Box 4062
Boston, MA
02211

* Note:
For BWSC Permits,
enter the LSP.

A. Permit Information

BWP IW 38

1. Permit Code: 7 or 8 character code from permit instructions

Application/Payment

3. Type of Project or Activity

Industrial Sewer User

2. Name of Permit Category

FEB 19 2008

B. Applicant Information - Firm or Individual

Vitasoy USA

1. Name of Firm - Or, if party needing this approval is an individual enter name below:

2. Last Name of Individual

1 New England Way

5. Street Address

Ayer

6. City/Town

Dan MacPhail

11. Contact Person

3. First Name of Individual

MA

7. State

01432

8. Zip Code

978-772-6880

9. Telephone #

4. MI

3130

10. Ext. #

dan.macphail@vitasoy-usa.com

12. e-mail address (optional)

C. Facility, Site or Individual Requiring Approval

Vitasoy USA

1. Name of Facility, Site Or Individual

1 New England Way

2. Street Address

Ayer

3. City/Town

MA

4. State

01432

5. Zip Code

978-772-6880

6. Telephone #

3130

7. Ext. #

94-25-59642

8. DEP Facility Number (if Known)

9. Federal I.D. Number (if Known)

10. BWSC Tracking # (if Known)

D. Application Prepared by (if different from Section B)*

1. Name of Firm Or Individual

2. Address

3. City/Town

4. State

5. Zip Code

6. Telephone #

7. Ext. #

8. Contact Person

9. LSP Number (BWSC Permits only)

E. Permit - Project Coordination

1. Is this project subject to MEPA review? ☐ yes ☒ no

If yes, enter the project's EOE file number - assigned when an Environmental Notification Form is submitted to the MEPA unit:

EOEA File Number

F. Amount Due

DEP Use Only

Permit No:

Rec'd Date:

Reviewer:

Special Provisions:

1. ☐ Fee Exempt (city, town or municipal housing authority)(state agency if fee is \$100 or less).

There are no fee exemptions for BWSC permits, regardless of applicant status.

2. ☐ Hardship Request - payment extensions according to 310 CMR 4.04(3)(c).

3. ☐ Alternative Schedule Project (according to 310 CMR 4.05 and 4.10).

4. ☐ Homeowner (according to 310 CMR 4.02).

053318
Check Number

\$1,605.00
Dollar Amount

2/15/2008
Date